

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: NEW HAVEN OF OSHKOSH (410073)

Address: 2831 HARRISON ST, OSHKOSH, WI 54901

License Status: REGULAR

Licensed/Certified/Registered 01/01/1987

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0091638 **End Date:** 11/13/2003 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006913 Served 12/11/2003

Deficiencies Cited

83.21(4)(n)4

83.41(10)(b)

Subject Area

FREE FROM PHYSICAL RESTRAINTS

MECHANICALS IN GOOD REPAIR

Compliance
Verified

Corrected

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

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Complaint History

Date Complaint Received: 08/28/2003

Date Investigation Completed: 11/13/2003

Subject Area(s)

SUPERVISION
RESIDENT RIGHTS
MEDICATIONS

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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